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APPLICANTS

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**** CONTINUING DATA ******* *Yes KCS*

This appln claims benefit of 60/402,487 08/08/2002
 and claims benefit of 60/405,979 08/26/2002

**** FOREIGN APPLICATIONS ******* *None KCS*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

**** 11/06/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 34	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>KCS</i>	INITIALS <i>KCS</i>		

Verified and Acknowledged

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TITLE

Safety needle and shield

FILING FEE RECEIVED 555	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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